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Resist Newsletter, Apr. 1993

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Funding Social Change Since 1967

RESIST

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A Call to Resist Illegitimate Authority

April, 1993

Environmentalists and Breast Cancer Activists Tell New York Commission: ACT NOW!

TATIANA SCHREIBER

On March 2nd, the New York City Commission on the Status of Women (CSW) and the Women's Environment and Development Organization (WEDO) held a public hearing to address the connection between breast cancer and the environment. More than thirty environmentalists, cancer activists, cancer researchers, public health officials and politicians addressed the commissioners in the hope that their testimony could spur legislation and halt the ferocious pace at which this disease is killing women.

The hearings covered potential risk factors including: pesticides and other toxic chemicals; radiation exposure from power plants and nuclear testing; electromagnetic fields; hormones in food; reproductive technologies such as Depo-Provera; and mammography. In addition, activists in Long Island, New York City and Boston reported on their work and upcoming plans. Because we have addressed many of these issues in an



Bella Abzug (center), Chair of the New York City Commission on the Status of Women, and Dr. Devra Lee Davis (right), of Mt. Sinai Medical Center, being interviewed by Channel 4, March 2, 1993.
Photo: Lise Beane, Women's Community Cancer Project

earlier issue of the RESIST newsletter (#246, May/June 1992) here we will provide edited testimony from a portion of the hearing, focusing on information that was not in the earlier article. For more details, contact the CSW, 52 Chambers Street, Suite 209, NY, NY 10007. Tel. (212) 788-2738. For a report on mammography for women under 50, contact the

National Women's Health Network, 1325 G Street, NW, Washington, DC 20005, or call (202) 347-1140.

BELLA ABZUG, Chair of both the CSW and WEDO, opened the hearing:

I am here today as the chair of two organizations, one local, the other inter-
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LETTERS

Dear RESIST,

On behalf of the Union of Palestinian Women's Associations (UPWA), we wish to express our sincere appreciation for the continued support we've received. [Your recent grant] to UPWA's Leadership Development Program will result in expanding and strengthening this important program designed to develop the leadership capacity of Palestinian Arab women community organizers.

We also wish to recognize the important and valuable role of RESIST in providing crucial funds and assistance to many excellent groups working for peace and social justice; which allows organizations like [ours] to continue developing its programs while working within the broader movement for peace, justice, and equality to effect social and political change.

We feel honored and proud to be a grantee of RESIST, a truly unique foundation whose dedication and commitment to the struggles of women, and peoples in communities of color spans a period of over 25 years and continues to be source of em-

powerment and hope for us all.

Finally, we wish to extend special congratulations to the dedicated board members and staff of RESIST on the occasion of the foundation's 25th Anniversary Celebration. May our combined efforts contribute to a better society for all our future generations.

Khariyeh Abudayyeh and Maha Jarad
Union of Palestinian Women's Associations
Chicago, IL

Dear RESIST,

What a superb newsletter you put out! It's always good, and sometimes it's superb. I read the February issue with great interest and, moved by the call not to accept NAFTA but to organize, took it to my church (very main-line Protestant) Peace and Justice Committee. I proposed that we do some study of NAFTA and then perhaps move on to action. There was some resistance, but eventual agreement that everyone would at least read the newsletter, and we would make further decisions after that. So

I need to get six to ten copies for committee members.

Many thanks for the great work you are doing. It boggles my mind that so few of you can do so much.

Sincerely,
Virginia Senders, PhD
Shutesbury, MA

Ed. Note: Gee thanks! This is what it's all about. We're very happy to provide 10-20 copies of the newsletter for free for organizing purposes if we have enough extras available. For more than that, we may have to charge for postage, so call or write to ask if there are enough and how much it will be. For back issues of "Breast Cancer and the Environment," (#246, May/June, 1992) we are charging \$1.00 per copy because we had to re-print the issue to fulfill requests. Please write with comments, criticisms and suggestions for future articles.

Special Resist 25th Anniversary T-Shirts

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Classic Sweatshirts _____ (quantity) _____ (size) (They come in Black only) (\$15 each)

Name: _____ Phone: (____) _____
Address: _____ Enclosed is my check for \$_____
City/State/Zip _____

Please make checks payable to Resist and send to: Resist, One Summer St., Somerville, MA 02143.



ILLEGITIMATE AUTHORITY

Funding social change since 1967

For information and grant guidelines write to:
Resist, One Summer St., Somerville, MA 02143

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■ Looking Back 16 Years

to: Issue #117, September 1977.

During our anniversary year (October 1992-October 1993) we are re-printing occasional articles from previous years, in an effort to reawaken our memories and inspire "looking forward" articles on related topics.

Barbara Smith delivered the following address to a rally in Boston on Monday, August 7, 1977. Both the rally on the steps of the Massachusetts State House and a march were organized by the Abortion Action Coalition to protest the Federal Government's cut off of funding for Medicaid abortions as well as legislation that was before the Mass. Senate [the Doyle-Flynn bill] which would prohibit state spending for abortions for poor women.

I am speaking today for the Abortion Action Coalition. I am also a member of the Boston Committee to End Sterilization Abuse (CESA). I am speaking as a Black woman and a Black feminist and my remarks will reflect all of these commitments.

First, I'd like to give some idea of where we are in this struggle at this moment. A lot has happened just in the past week and it is confusing. It's important to know how our rights are being threatened on both a state and a federal level.

The first major threat to our right to choose abortion was the Hyde Amendment passed by Congress last October. The Hyde Amendment prohibits the spending of Medicaid funds for an abortion unless the mother's life is endangered. (Of course, this does not take into account that every woman who is denied access to a medically safe, legal abortion qualifies since her life will definitely be in danger.) A U.S. District judge in New

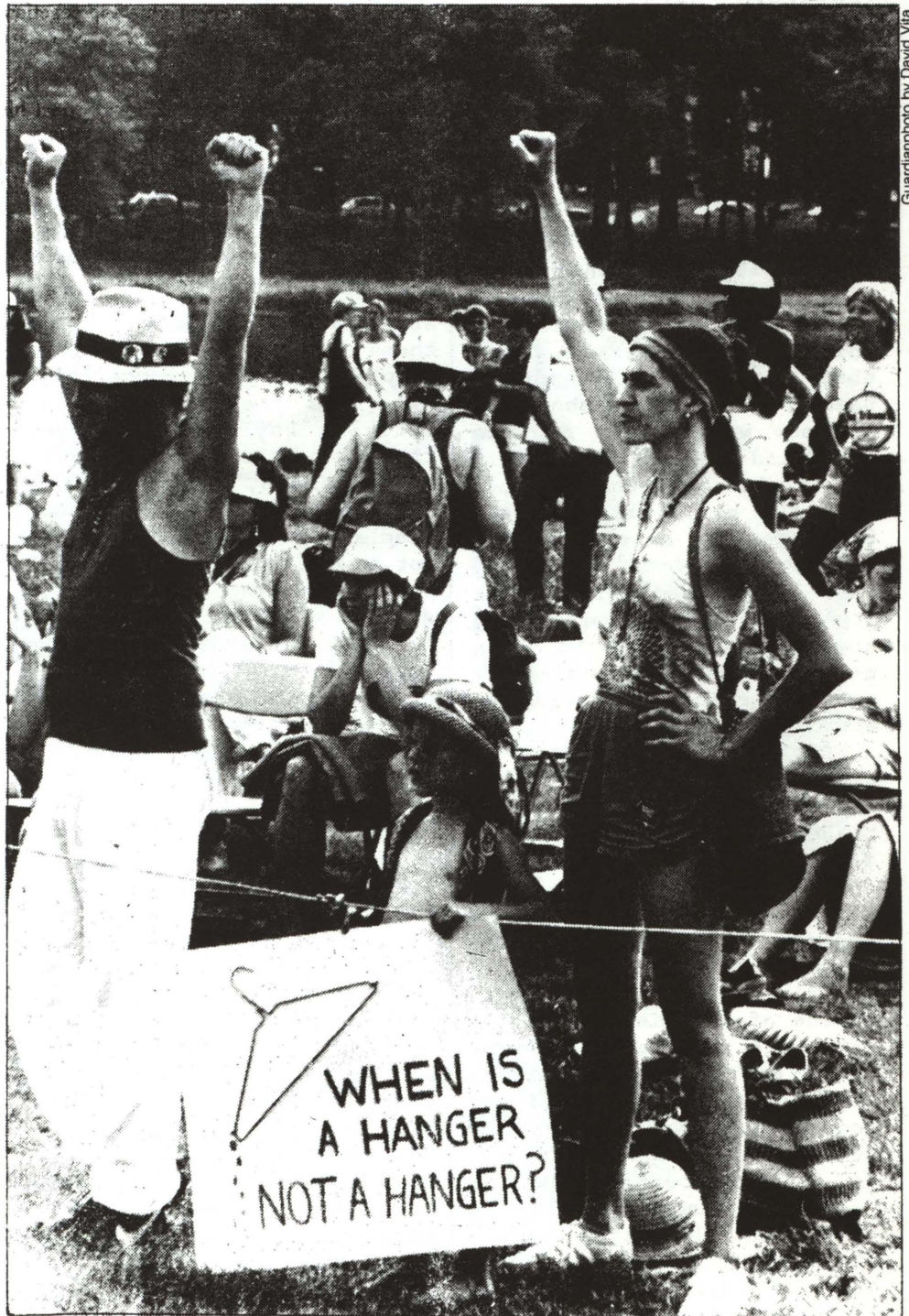
York, John Dooling, then ruled that the Hyde Amendment was unconstitutional and placed an injunction against it, which meant that it could not be enforced. This June the Supreme Court ruled that fed-

eral funds need not be used to pay for Medicaid abortions and that it was up to each state to decide whether they would use their own funds.

Because of this decision, Judge Dooling was told to

Abortion Rights Demonstration, circa 1977.

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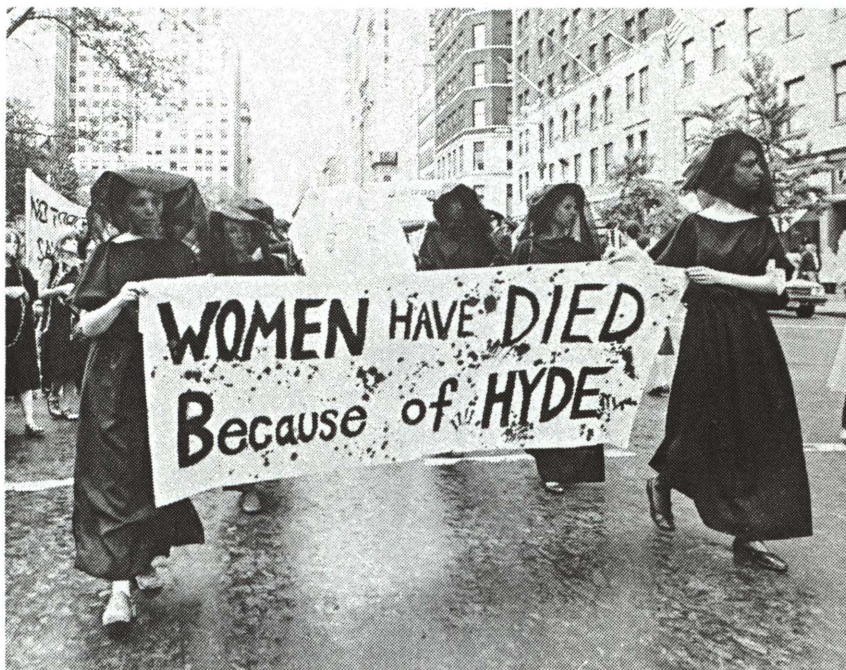
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reconsider his previous decision and on Thursday of last week he lifted the injunction, which means that the Hyde Amendment is now in effect. H.E.W. Secretary Califano, who is opposed to abortion for any woman, immediately announced the cutoff of federal funds for Medicaid abortions. The same day, state welfare departments were informed. In Massachusetts, Human Services Secretary Jerald Stevens reacted to this cut-off by saying that the state would continue to pay for Medicaid abortions with its own money if the federal government refused.

This would cost the state approximately \$900,000 a year. But don't breathe a sigh of relief. This is where the Doyle-Flynn bill that we're protesting today comes in. This bill, if passed, says that state funds cannot be used to pay for the abortions of poor women, many of whom are Third World women. Governor Dukakis says that he will veto the bill, but he needs the votes of 14 senators to sustain the veto. This may seem complicated but I think it's important to see exactly how they are messing with us and to also see that we are involved in a national struggle.

Our right to abortion is still in jeopardy and from the Supreme Court to Jimmy Carter to Henry Hyde to Joseph Califano to John Dooling to Charles Doyle and Raymond Flynn, it's up to white men to decide. Well, it's not their right to decide. It's ours.

This attack upon abortion is one of a series of attacks upon the rights of women, Third World people, welfare recipients, workers and gay people that have characterized this recent period of history. It is frightening how the Right has banded together to take away the gains people struggled to win in the 1960s. They are trying to erase that



Jerzy Kowalski/LNS

3500 women and men marched in New York City on May 16, 1981 to protest the limiting of medicaid funding of abortions.

struggle and to erase us and these forces are all the same people. They just change their hats and their names. The anti-ERA Phyllis Schafleys, the anti-busing ROAR Louise Day Hickses, the anti-gay Anita Bryants are all the same people and they are definitely out to get us.

It's us who are going to die from illegal abortions, not them. In 1969, 75% of the women who died from abortions were Third World women. The H.E.W. estimates, is not ashamed to estimate, that 250-300 women will die every year as a result of the Hyde Amendment and that 250,000 women will be hospitalized with serious medical complications as a result of illegal abortions. They talk about right to life. Whose life? Clearly not the rights of poor, Third World women to life. The fetus fetishists get all teary-eyed and sentimental about the right of every embryo to live. They say that abortion is murder but they will be responsible for the murder of countless women if the Doyle-Flynn bill is passed. Babies and human life are not their concern at all, but [rather] the

oppression and control of women. They know that when a woman is in control of her reproduction she is in a much better position to control and make decisions in other areas of her life. The patriarchs will not allow this. Patriarchy does not allow this.

[Barbara Smith notes that if she were writing this today she would certainly add "the capitalists."]

Another disastrous result of the denial of the right to abortion will be an increase in sterilization and sterilization abuse of Third World women. The very same women who will no longer have access to abortion if the Doyle-Flynn bill passes and the Hyde amendment is enforced are already in the most danger of being sterilized against their wills. H.E.W. already spends more money for sterilization than it does for abortion and the amount is likely to increase. Poor women will be forced to "choose" sterilization as a last resort for limiting their families if abortion is no longer available. This is truly genocidal because sterilization means

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national, but both dedicated to making a better world: the New York City Commission on the Status of Women and the Women's Environment and Development Organization. We have come together to explore, for the first time ever in a forum of this kind, growing scientific evidence of a link between the incidence of breast cancer and environmental factors.

Our ultimate goal is to bring pressure to bear on local, state and federal public health policy makers to broaden the parameters of the scientific inquiry so that more resources, both financial and scientific, can be redirected toward finding causes that will lead to the prevention of a disease that is killing 44,000 women every year. This is a responsibility that society has to face. Seven out of ten women who will come down with the disease will have no known risk factors to explain it. We think it is time we step up our efforts to look for causes, without abandoning our commitment to developing better and better treatment protocols.

One of the reasons that we're in the situation we are in is that for too long medical research, and other forms of scientific research, have often eliminated the participation of women in making their findings. Now that's beginning to change, and the participation of so many women, many of whom are here today, have helped to do that — to create a public outcry about women with AIDS, who for a long time were ignored by the CDC; about women and heart disease; and now, in the question of cancer itself.

Why Look at Environmental Risks?

DR. DEVRA LEE DAVIS, a visiting professor in the Dept. of Environmental and Occupational Medicine at Mt. Sinai Medical Center, and founding director of the International Breast Cancer Prevention Collaborative Research Group:

Some of our colleagues have said breast cancer is not an epidemic. I want to know, if relatively more women are

dying today than ever before, how can this not be an epidemic? The word epidemic comes from the Greek and means "among the people." Breast cancer today afflicts one out of every nine women by the age of 85. Three decades ago it affected one in 20. Is that not an epidemic? Some people have suggested that this epidemic is nothing more than the fact that we are getting better at detecting cancer. Let me tell you why this is not likely to be the whole explanation. The most important reason is that we don't even know how much mammography is taking place today. There is no national survey of mammography. The estimates of the rate of the mammography have developed from a Gallop poll conducted for the American Cancer Society of its generally well-educated, upper middle class volunteers, most of whom are quite health-conscious and almost all of whom can get reimbursement for their mammograms. For rest of the public, we really don't know what the rate of mammography is.

But I can tell you, one reason mammography cannot explain all of the increases in breast cancer is that the increase is occurring not just in new cases, but in deaths, and the increase is occurring not just in the United States, but in most of the major developed countries of the world, and in some of those countries there is no mammography screening of young women.

The two biggest risk factors for breast cancer are sex and age. We can tell you what women want. We want better treatments for those of us who are at risk, which is all of us. We want safer and more effective screening techniques. For our daughters and their children, we want to prevent the disease from claiming as many of them as it will us. We want to know why relatively more women in Bella Abzug's generation, women now in their sixties, are dying of breast cancer. From all we know about breast cancer, they should have less of the disease. After all, they had children earlier in life, and they had more of them.

So why are these mothers of the baby-boomers dying more? Maybe the

answer has something to do with the unusual environments they encountered in the newly industrializing workplace, and then later in those sparkling clean domestic environments that they were encouraged to maintain in their households, with all those brand-new chemicals that were used indoors, materials you purchased at the drug store and hardware store, such as pesticides which are banned today.

We can explain only 30% of the cases of breast cancer. [I.E., only 30% of women who get breast cancer are in so-called high-risk categories such as having a family history of breast cancer.] So what accounts for the rest? According to several new studies (see RESIST # 246) women with breast cancer have increased levels of certain chemicals [40-50% more residues of PCBs and metabolites of DDT] in their [breast] fat. This should come as no surprise, as experimental studies in animals have identified a number of causes of breast tumors. We have failed to pay attention to the animal studies. The lively debate about the role of dietary fat may not be so polarized if the issue becomes *what's in the fat*, not just the fat itself. As to other causes, such as electromagnetic fields (EMFs) or other chemical exposures, the evidence remains incomplete, but is tantalizing and growing.

All of the known risk-factors that can be identified for breast cancer can be linked to estrogen. But guess what? Estrogen is not just something that you make inside yourself. It is influenced by chemicals. That is to say, those pesticides and toxic chemicals that you are taking into your body — in animals, [were associated with] increased levels of estrogen. Why should they not do it in humans? The common link of all of the known and suspected risk factors for breast cancer could be this: there are compounds we call xeno-estrogens, which although foreign to the body, once taken into the body increase the total amount of estrogen you are exposed to. That could be the link here. We are trying to pursue that research.

Why have we paid so little atten-

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Cancer Hearing

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tion to preventing a disease that afflicts so many women? One reason is that prevention is less glamorous. But also, think about this: fewer profit if we prevent the disease. More profit from it's treatment. Although this country now spends about 14% of its GNP on health care, we have devised no new cure for advanced breast cancer in two decades. We spend five times more on chemotherapy than is spent in England, but we have no better record on cancer deaths. We cannot afford to keep on with the same old ways. If we could figure out how to prevent only 20% of all cases, we will have spared 35,000 women and their families from the sometimes disfiguring, and often disabling experience of breast cancer.

[Currently there is debate in Congress about the value of the Delaney Clause which forbids the addition of cancer-causing pesticides to processed foods.] We have had a failure in this country to regulate pesticides adequately and that failure is evidenced by a number of recent studies. We know that dogs whose homeowners use residential pesticides die of increased rates of certain cancers. We know that in some homes where children have been exposed to pesticides indoors, those children have increased rates of brain cancer and leukemia. We have growing evidence that there may be a link. The problem with the Delaney Clause is the public has come to believe that we are protected against these exposures. The Delaney Clause has absolutely nothing to do with such things. It does not apply to what you spray in your house or put on your lawn. In addition it does not provide any protection for those who are at most risk, who are farmers and gardeners.

We know from more than 20 studies in 8 different countries that farmers are at increased risk for certain cancers that we think are associated with their exposure to pesticides. What we need is a comprehensive reform of pesticide regulation in total. It may mean changing Delaney, but not to make it weaker; rather, to make it more comprehensive.



Barbara Balaban of One in Nine, a Long Island cancer activist group, being interviewed by RESIST editor Tatiana Schreiber at the March 2nd hearing in NYC. Photo: Lise Beane, Women's Community Cancer Project.

ABZUG: We hope that's what will happen, but to make sure, those of you who are interested should write to Carol Browner at the EPA and let her know what you think.

Radiation Exposure and Breast Cancer

DR. JAY GOULD, medical statistician and economist, and Director of the Radiation and Public Health Project, sponsored by the Commission for Racial Justice of the United Church of Christ. He is the coauthor, with B. Goldman, of *Deadly Deceit: Low-Level Radiation High Level Cover-Up*:

In the period between 1935 to 1944, before the nuclear age began in 1945, there was an actual decline in breast cancer incidence; if it had continued until today, the incidence of cancer in women between 50 - 74 would have been half of what you see today. I'd like to call your attention, as a statistician, to the data I've gathered, based on information from the National Cancer Institute. What [my the data show] is that the increase in breast cancer really began with the nuclear age in 1945. But you also see that in 1970 after the opening of the Millstone reactor [on Long Island Sound] you had another increase which is so large it's impossible to escape the fact.

[In addition,] after 1979, the date of the Three Mile Island accident, there was an enormous national increase which apparently peaked in 1988, seven years after the accident. The other chart shows that in the country as a whole, because civilian nuclear reactors are concentrated in the northeast part of the country, you have very high per capita exposures in those regions [strongly] correlated with very high breast cancer rates. Whereas in regions with very few reactors, like the mountain regions and places like Texas and Louisiana, where male cancer rates are extremely high because of exposure to petrochemical contaminants in the environment, the amazing thing is that because of the relative lack of radioactive emissions from nuclear reactors, breast cancer rates in those states are extremely low.

Now the probability that this kind of effect could be produced by chance is so small it's inadmissible. It means that the scientific community has to find out: why do we have this correlation? The Millstone Plant, in particular, is only 12 miles away from Suffolk County. From 1970 to 1975 it had enormous emissions of radioactive iodine and strontium, two of the most lethal radionuclides, known to be highly carcinogenic, and which concentrate in milk and water and other foods. This kind of exposure simply has to be inves-

tigated as a possible additional cause of the breast cancer epidemic which is raging in Long Island.

In New York City, from 1940 to 1944, the breast cancer mortality rate was declining. But then in 1945, there was a tremendous increase in NYC as opposed to the rest of the state. That increase reached a peak in the mid-60s, as a result of fact that, finally, activists put an end to atmospheric bomb tests in 1963, so that in 1965, the amount of strontium-90 in the bones of New Yorkers began to decline. Then in 1970, Millstone and Indian Point began to add their emissions to the mix, and today exposure of residents of Westchester, Connecticut and Nassau and Suffolk counties are the highest in the country, something like three times the national average. Dr. Sternglass will discuss the biomedical mechanism which is operating.

[Note: Also see, "Chernobyl—The Hidden Tragedy," by Jay Gould, in *The Nation*, (March 15, 1993).]

Mechanics of Radiation Induced Cancer

E. J. STERNGLASS, Prof. Emeritus of Radiological Physics at Univ. of Pittsburgh School of Medicine, and the author of *Secret Fallout: Low-Level Radiation from Hiroshima to Three Mile Island*:

For many decades it has been known that radiation of all types produces cancer. What was not understood was how very small amounts of radiation, such as what came down from fall-out and bomb-testing in the fifties and sixties and from releases from nuclear reactors, could produce such large changes in cancer rates in different countries and in different regions in this country. The essential point that needs to be made is that these sudden changes came about because we did not realize that with radiation produced in the fission process, the nuclear elements such as strontium-90 and iodine-131, act very differently from natural background radiation and from medical X-rays.

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Resources on Cancer and Environmental Risks

PESTICIDES

New York Coalition for Alternatives to Pesticides, 33 Central Avenue, Albany, NY 12210. (518) 426-8246.

"Breast Cancer and the Environment, The Chlorine Connection," Greenpeace, 1017 W. Jackson, Chicago, IL 60607. (312) 666-3305.

RADIATION

National Association of Radiation Survivors, P.O. Box 20749, Oakland, CA 94620. (415) 655-4886.

Radioactive Waste Campaign, 625 Broadway, 2nd Floor, New York, NY 10012.

ELECTROMAGNETIC FIELDS

Unfortunately we did not have room in this issue to include information about the potential danger of electromagnetic fields. However, extensive literature is available from these sources:

Alliance for Safe Energy, P.O. Box 100, New York, NY 10014-0100.

P.R.O.T.E.C.T., Prudent Residents Opposed To Electric Cable Transmission, P.O. Box 203, Goshen, New York, 10924. (914) 496-5334.

Microwave News, Box 1977, Grand Central Station, NY, NY 10163. (*Microwave News* has an EMF Resource Directory).

"The Cancer at Slater School," by Paul Brodeur, *The New Yorker*, Dec. 7, 1992. (For reprints of Paul Brodeur's *New Yorker* articles concerning EMFs, call (212) 536-5400, back issue department.

"Magnetic fields and cancer in people residing near high voltage power lines"; IMM, Publication Service, Box 60208, 10401, Stockholm, Sweden.

Sugarman, Ellen. *Warning: The Electricity Around You May be Hazardous to Your Health* (A Fireside Book, Simon & Shuster, 1992).

GENERAL INFORMATION

Rachel's Hazardous Waste News The Environmental Research Foundation, P.O. Box 73700., Washington, DC 20056-3700. (202) 328-1119.

"The Cancer Establishment Ignores Avoidable Causes of Breast Cancer," paper presented at the Mar.2 hearing by Samuel S. Epstein, Prof. of Occupational and Environmental Medicine, School of Public Health, University of Chicago. (312) 996-2297.

CANCER ACTION GROUPS

[For a list of cancer action groups, write, National Breast Cancer Coalition, P.O. Box 66373, Washington, DC, 20035. (202) 296-7477.]

Women's Community Cancer Project, c/o The Women's Center, 46 Pleasant St., Cambridge, MA 02139. (617) 354-9888.

Women's Cancer Resource Center, P.O. Box 11235, Oakland, CA 94611. (415) 548-WCRC.

Breast Cancer Action, P.O. Box 460185, San Francisco, CA 94146. (415) 922-8279.

Lesbian Community Cancer Project, Pat Parker Place, 1902 West Montrose, Chicago, IL 60613. (312) 549-4729.

One in Nine, The Long Island Breast Cancer Action Coalition, c/o Adelphi University School of Social Work, Garden City, NY 11530. (516) 877-4370.

West Islip Breast Cancer Coalition for Long Island, 400 Montauk Highway, West Islip, NY 11795. (516) 665-4077.

Also, if you live in New York state, a new company will help you locate potential environmental hazards in your neighborhood, contact: Walter L. T. Hang, President, Toxic Targeting, 215, North Cayuga St., Box 34, Ithaca, NY 14850. Phone: 1 (800) 2-TOXICS. Mr. Hang is the former director of New York State Public Interest Group, and author of NYPIRG's Toxics on Tap.

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It was not until 1972, 30 years into nuclear age, that it was discovered [by Abram Pektkau] that the small protracted radiation emissions over a long period of time produces much greater damage to cell membranes through the formation of free radicals which attack cell membranes and puncture them in matter of a few minutes to hours; as a result, very small amounts of radiation are typically 100-1000 times as toxic as the same [dosage] of a medical X-ray given in a short time. That's because these free-radicals interact and de-activate each other, causing them to become inefficient at high concentrations but very efficient and deadly at low levels.

Strontium-90 is very dangerous, because it gives off a very fast beta ray which can penetrate the bone marrow and produce an effect on the immune system of the whole body which impairs the ability of the body to fight cancer. These things were only fully understood in the last 15-20 years. Over 40 studies in the scientific literature show that around one nuclear facility after another, there has been increase in cancer, including breast cancer. This epidemiological evidence is overwhelming, but was not accepted because it was not understood how a small amount of radiation could have such enormous effects.

In fact, the [Petkau effect] causes the risk to rise much more rapidly at low-doses than at high doses, and as a result, we now find that small releases, regarded as harmless in the past, are in fact causing contamination of our milk and food, and this has never been adequately investigated because it was believed to be too small a dose compared to ordinary x-rays or mammography. We have grossly underestimated the effects of very small amounts of radiation added into our drinking water supply.

Since 1967, New York city has been able to obtain more than 80-90% of its water from distant sources in the Catskills and the Delaware water system. Since then, the cancer rates in New York City have declined. But in

Westchester, where they continued to use the Croton water supply, a few miles downwind from the Indian Point plant, there has been a continuing and sharp rise in cancer rates. The same thing has been happening on Long Island.

It is my recommendation that we look immediately at ways to set up a commission to reexamine whole question of shutting down Indian Point. We did not appreciate how dangerous it is to the water supply of New York City. And the people of Harlem and the South Bronx are more heavily exposed to water from the Croton reservoir than people from Brooklyn, Queens and Staten Island, who receive much of their water from the more distant sources which are not contaminated by radioactivity.

We would actually like to see all the nuclear plants in the country phased out.

ABZUG: OK, well you know this commission has limited authority, but we'll work on it.

STERNGLASS: We now have an administration that must show an ability to reduce health costs or it will not be reelected. We can show that after Three Mile Island was shut down, infant mortality in Pennsylvania dropped 30-40% in two years after it was shut down. We have an enormous amount of data, which is ignored by the military nuclear establishment, which says that all these health problems have been vastly aggravated by our refusal to admit the biological hazards of nuclear bomb testing and nuclear weapons production...

Note: Jay Gould and Dr. Sternglass have been asked by members of the National Breast Cancer Coalition to prepare a report on the role of radioactive chemicals in contributing to high breast cancer rates in Long Island.

Long Island Women Take Action

LORRAINE PACE, president of the West Islip Breast Cancer Coalition.

Our grassroots organization evolved less than one year ago after I was diagnosed with breast cancer. I have twenty friends who have this disease, who live in West Islip. I felt that this was more than just a coincidence. I needed to find out what we all have in common. I must say, living on Long Island is a delight, but we have one of the highest rates of breast cancer in the state. Somehow, there seems to be something drastically wrong. Risk factors [primarily being Jewish and affluent] and lack of education and early detection have been the explanations we have been given from our experts. Long Island can no longer accept these explanations without demanding further studies.

[In trying to find out why so many women were being diagnosed with breast cancer] I discovered that the New York tumor registry was at least four years behind in their statistics. No one could tell me how many women were diagnosed with breast cancer in 1992. The statistics quoted were from 1988. Yet, with one phone call I could find out who won the New York State lottery, and where their ticket was purchased. These priorities are clearly unbalanced and we feel they must be addressed.

Since there were no current statistics available, we decided to do a demographic study of West Islip. Our goal was to locate and visually identify the areas and incidence of breast cancer. From the beginning we had the assistance of Dr. Roger Grimson, a biostatistician [at SUNY-Stonybrook], who oversaw the color-coding and mapping process. With the assistance of the Suffolk County Health Department and Good Samaritan Hospital in West Islip, we have written a single page survey and distributed it to every household. So far, our response has been over 52%, which goes to show that women are very concerned.

On the map, we have definitely

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Cancer Hearing

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found certain clusters, consistently on the whole map. Of about 4500 respondents so far, over 300 had malignant breast cancer, more than 1,000 had benign breast disease, and **most** reported other forms of cancer in their families. I think this needs to be thoroughly investigated. The survey has had another effect on West Islip. Nineteen women who answered our survey said they didn't have breast cancer. Then, they went for a check-up and found out they were walking around with malignant breast cancer. That's a lot of women in one very small little area.

During the Vietnam War, we all mourned the loss of 58,000 men and women. During that same ten year period, our nation lost 330,000 women to breast cancer. They went very quietly, but it's time not to be quiet anymore.

[After our first mailing we] went to our congressman who is from West Islip. He contacted Revlon, and they donated \$5,000. We did two more mailings. We're hoping to get at least a 75% response rate. We'll go door to door. We're very determined, we want to know why we got this breast cancer and why all our friends got it. We've been working very hard, but we don't intend to stop.

We intend to map out where all the transmission lines are and all the transformers, and all the water wells. We wrote to the Long Island Lighting Co. and we asked for an address of where every transformer is, to look at risk from EMFs. So far, they have sent a map, but you have to be a genius to read the map. I don't even think they can read it; we said, please, just send us the addresses, we want to compare, maybe where there's a transformer, maybe that's where these clusters are? Maybe there's something else. We don't know, but we don't want to leave one stone unturned.

One in Nine Convenes its Own Research Panel

BARBARA BALABAN, director of New York's statewide breast cancer hotline and support program at Adelphi's

School of Social Work; member of steering committee of One in Nine, the Long Island Breast Cancer Action Coalition; also serves as New York State grassroots coordinator for the National Breast Cancer Coalition [Balaban recently served as the only Long Island representative on the panel of the Centers for Disease Control which examined data from a Long Island Breast Cancer study and concluded that the high rates of breast cancer in Suffolk and Nassau County were due to "known risk factors."]:

Government officials and their scientific representatives would have us believe it's "the preponderance of women on Long Island with high risk factors" and what's really insulting is that they don't think we can do the arithmetic to know that they still have not begun to look at the **unknown** risk factors, those that account for more than 50% of all breast cancer cases.

My first suggestion is that we have to stop referring to "high risk factors." These are really the small amount of known risk factors, which are usually simply described with no explanation. There are no studies on why being Jewish or well-to-do causes breast cancer.

Next we have to look seriously at what the unknown risks might be. There's been a lot of discussion of electromagnetic fields, but as yet, no definition of acceptable levels of EMFs, so we have no place to begin. When I served on the CDC panel. I raised the question of the environmental impact on breast cancer incidence. I was told this was too difficult an area to study, and would be too expensive. Too expensive compared to what? The cost of treating breast cancer? The disruption to a family? A woman's life? Too difficult? What do scientists do when their children tell them algebra is too difficult? We hope they aren't told not to bother, but are sent back to try harder.

Breast cancer, an epidemic disease for which every woman is at risk deserves no less consideration. Today in Washington, a subcommittee is voting on the National Institute of Health's reauthorization bill. There is a Waxman

amendment calling for a two-year study by the National Institute of Environmental Health to study the relationship between the environment and breast cancer. [The amendment passed in the House by a vote of 283-131, an important victory in this struggle.] We need elected officials in every city to try to have an impact on federal legislators. We need support desperately to help them understand that this is not just a group of ninny women walking around with small cause. This effects every family in this country.

Government sponsored scientists have told us that we on Long Island have done a great job mobilizing community support. They then had the nerve to suggest we redirect our energies toward increasing compliance with early detection mechanisms, and by implication preserve the status quo.

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SPRING OVER ELF

May
7 & 8

Join us at
Anathoth Farm
740 Round Lake Rd.
Luck, WI 54853
(715) 472-8721 or
(715) 472-8714

May 9

Join us this
Mother's Day in
resistance to the
Navy's "Project ELF"

located in the
Chequamegon
National Forest in
Northern Wisconsin.

For more information:
Nukewatch
P.O. Box 2658
Madison, WI 53701
(608) 767-3023



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They conveniently forgot that early detection is not prevention. We still do not know the cause of breast cancer, nor do we have a cure.

Well, we women know better than they what we have to do. On Nov. 1 we are convening a two-day scientific hearing on Long Island. Leading researchers throughout the country will present creative ideas on some new directions we can look to understand more about the environment/breast cancer connection. [The panel will be headed by Dr. Devra Davis, and Dr. Susan Love, director of the Breast Cancer Center at the University of California in Los Angeles.] This will be paid for by community-raised funds, and not one person dedicated to the patronizing and regressive attitudes of previous administrations will be included.

The National Breast Cancer Coalition has shown that united, we have a voice that reaches all segments of the government. On Sunday May 2nd, we will rally in Washington, DC to demand that breast cancer be declared a national epidemic and be made a top priority in this country. You, your families, and your friends are invited to join us. Together we can make a difference. We have to, our lives depend on it. In the time I've been speaking, two more women have been diagnosed with breast cancer. For every two speakers, another woman dies of this disease. This has got to stop. Thank you. ◇

Looking Back

that you are permanently unable to reproduce instead of being able to choose the time when you may have children in the future.

No existing contraceptive method is foolproof no matter how conscientiously used. If the government and compulsory pregnancy forces were really serious about this issue they would be working day and night and pouring millions of dollars into developing a contraceptive method that is both medically safe and effective.

And even then abortion would be necessary in some cases as a back-up measure. But, of course, they aren't serious except about curtailing the rights of us all. How can we take a government and a society's pro-life stance seriously when they are the same people who also brought us the neutron bomb, a bomb that kills people and leaves property intact?

The Supreme Court decision of 1973 said that it is between a woman and her doctor to decide if she wants to terminate a pregnancy. It does not say that every American woman must undergo abortion, it merely says that if she wants to have an abortion, as women throughout the ages have had in a valid attempt to control their fertility, she will not have to die in the attempt.

The Doyle-Flynn bill, the Hyde Amendment and the Supreme Court decision are nothing but sexist and racist attacks on poor people. I don't know how many of you knew Fanny Lou Hammer, a poor Black woman, a civil rights activist and freedom fighter. She died this year and I just found out this week that in the early 1960s she was a victim of forced sterilization. She used to say, "I'm sick and tired of being sick and tired." I think we're all sick and tired of being sick and tired. It's time for the oppressors who are trying to control us to get real sick and real tired. We demand a woman's right to choose. Defeat the Doyle-Flynn bill. ◇

Barbara Smith is a Black feminist lesbian writer and activist who lived in Boston from 1972-1981. She currently lives in Albany, NY.

We hope to publish a "Looking Forward" article on reproductive rights in an upcoming issue of the newsletter.

*We Thought You Might
be Interested...*

Neighbors Talk to be published this spring...

Boston area writers announce the spring publication of *Neighbors Talk in Roxbury, Dorchester and Jamaica Plain*, a collection of poems, raps, and stories about Boston communities written by those who live there.

All kinds of people come together in *Neighbors Talk*: teenagers; women from the Dominican Republic and Haiti; Native Americans who live in Dorchester; people who've lived in the communities for over 60 years. More than 80 people contributed stories and served on the community editorial boards that shaped the book.

The images in *Neighbors Talk* create a vibrant picture of neighborhoods more often described by people who live outside them. Here, residents rejoice in neighborhood victories and Nelson Mandela's visit; youth defend rap with a touch of "pizzazz jazz."

Over half the funds to publish the book have been raised. The rest will come from pre-orders, so ordering now will help make publication possible. For price and postage info, call Rachel Martin (617) 522-6513, or write *Neighbors Talk*, 16 Glade Ave., Jamaica Plain, MA 02130. Note: Rachel Martin, a long-time friend of RESIST, guest-edited "Listen Up: Youth, Writing and Resistance," (RESIST, #237, July/August, 1991).

Computers Available for non-profits in Massachusetts...

The Nonprofit Computer Connection (NCC) is a technical assistance program helping nonprofit organizations use information technology effectively. NCC has several hundred personal computers it will distribute in 1993 to eligible nonprofits in Massachusetts. To be eligible, a group must be tax-exempt and have at least one full-time staff person. Community-based health and human services agencies, cultural organizations, community-based educational organizations, and housing and economic development groups will all be considered. Individuals, churches, schools, and "organizations whose primary activity is advocacy" are not eligible.

Call the NCC Donation Program Coordinator at (617) 728-9151, or write Donation Program Coordinator, Nonprofit Computer Connection, 30 Federal St., 5th Floor, Boston, MA 02110.

GRANTS

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activists from all the existing funds. The conference will be held April 30th-May 2nd near Washington, DC. RESIST's recent grant will be used to duplicate conference materials, for pre-conference organizing, and for the newsletter.

The Women's Alliance, 46 Pratt St., Framingham, MA 01701.

The Women's Alliance is a racially mixed member-run community group of over 400 people working with low-income women to enable them to take control over their lives. In 1986 the organization opened the South Middlesex Women's Center and Boarding House serving a 14-town area in Massachusetts. The House is a base for the group's programs, an information and referral center, and a home for up to 10 women, some with children. Many of these women are in transition from battering, substance abuse, or homelessness.

The Alliance runs a housing task force; an educational program on Entitlement Programs and Fair Taxes; a parents' rights' task force; a project on Leadership Development and Diversity; a Hispanic outreach program; and the Women's Center and Boarding House committee. Through these programs, the Alliance offers women information and support for self-advocacy, and skills and guidance in working on such issues as: childcare, housing, transportation, child abuse, domestic violence, and welfare rights. The Alliance also works with statewide groups on legislative issues such as refunding the Clothing Allowance for families on welfare.

The goals of the group are manifold, including adequate income controlled by women themselves with pay for childrearing; adequate and affordable transportation and childcare; adequate and affordable housing that tenants possess collectively; an end to violence against women including racial violence; recognition and respect for biculturalism in all areas of the community; and growth and strengthening of membership to achieve all these goals. The Alliance's new Leadership Development Program will allow a core group of women from diverse cultural and racial backgrounds to take on specific responsibilities within the Alliance. The women who participate in the program will make a two-year commitment to the Alliance and will lead the organization more

directly than has been possible in the past.

Participants will develop skills in the areas of public speaking, agenda planning, community outreach, and media relations. The most active members will learn negotiation skills, long-term planning, meeting facilitation, basic computer skills, financial management, and multicultural organization-building. RESIST's recent grant was used for a computer for this project.

The Vermont Women's Health Center, 336 North Avenue, Burlington, VT 05401.

The Vermont Women's Health Center (VWHC) is a private, non-profit health center which began offering routine gynecological and abortion services in 1972. Since that time, VWHC has expanded its services to include wellness programs, menopausal services, contraceptive care, obstetrical services, and sexually transmitted disease prevention, screening, and treatment. VWHC has provided expert testimony before the U.S. Congress, the U.S. Supreme Court and the state legislature. The group also provides training programs for family practice residents and fourth-year medical students, and develops patient handouts on a variety of women's health issues. In addition the Center runs educational programs for schools, community groups, and professional organizations and has written several training manuals that are used throughout the U.S. and Canada.

The Center is currently planning a resource directory with an emphasis on alternative health care providers; expanding into primary health care for women; playing an active role in the fight to preserve reproductive rights and improve women's access to healthcare nationwide and internationally; and is training physicians and mid-level practitioners to provide quality care including abortion and related services and outpatient gynecological care.

The VWHC is celebrating its 20th anniversary this year and is sponsoring projects throughout the year to promote dialogue on women, families, and health care. The Center's Educational Program will include forums on: Health Care Reform, defining an agenda which addresses the concerns of women; Women as Caregivers, addressing the needs of women taking care of elderly relatives, the needs of older women receiving care, and providing infor-

mation on resources for both groups; Creating Families, addressing a diversity of definitions of "family" including such issues as single parenting, adoption, families choosing not to have children; multigenerational families; and same-sex couples with families; and Adolescents Speak for Themselves, a series of projects led by teenagers, illuminating the concerns and ideas of young people and including a mural project and performance piece. RESIST's recent grant went to expenses for the Educational Program.

Salzman Grant Returned

In 1992 RESIST awarded its annual Salzman grant to the 1851 Awareness Campaign, a group of Native Americans working with other grassroots organizations and traditional peoples to provide community education "against all forms of Treaty lands, resource, and water rights relinquishments, continually attempted by the technically illegal, U.S. government-sponsored Indian Re-organization Act (I.R. A.) tribal governments." Unfortunately, we recently learned that the group has had to fold and will be unable to carry on the project at this time. They have returned the grant. If possible, RESIST will award two Salzman grants in 1993. These grants are from the Freda Friedman Salzman Memorial Endowment Fund, which was established by Mr. George Salzman in honor of his late wife, Freda Salzman. The fund is "dedicated to the purpose of supporting organized resistance to the institutions and practices that rob people of their dignity as full human beings... (giving) a high priority to the efforts of Native American peoples to resist cultural as well as actual genocide."

RESIST Media Arts Forum

RESIST often provides funding for the distribution and promotional aspects of media projects that are part of educational and organizing campaigns, although we do not fund production costs. We are considering screening some of the best videos and slide shows (maybe even radio shows) produced by our grantees in a few forums in the Boston area. If your group has a program that RESIST helped fund that you'd like us to consider, please **DON'T SEND IT TO US YET**, but drop us a note, describing the project (format, length, subject, and how it was used,) to Tatiana Schreiber, at the office.

GRANTS

In each issue of the newsletter we highlight a few recent grants made to groups around the country. In this issue we feature grants to groups working on women's issues. The information in these brief reports is provided to us by the groups themselves. For more details, please write to them at the addresses included here.

Union of Palestinian Women's Associations, P.O. Box 29110, Chicago, IL 60629.

The Union of Palestinian Women's Associations (UPWA) was established in 1986 to meet the specific needs of Palestinian and Arab women who had been involved in the student movement, peace groups, anti-intervention, anti-racism, and solidarity organizations. The UPWA in Chicago is part of a national organization with over 28 chapters and with a membership of some 2500 women in the United States. The organization has initiated programs including English as a Second Language classes, women's physical and mental health education, cultural projects, children's workshops on Arabic heritage and language, and more.

While working to develop the organizing and leadership skills of Arab women here, the group also works to support Palestinian women in their efforts to end the Israeli occupation of the West Bank and Gaza Strip. The group works to build alliances with women of various racial, ethnic, and national identities and works closely with Israeli and Jewish women on campaigns such as the effort to support Palestinian political prisoners in Israeli jails.

Current projects include a program to

address domestic violence and battering in the Arabic community; a human rights project; and a leadership training project. The group recently worked with Clergy and Laity Concerned in Chicago to train anti-racism workshop leaders to combat institutional racism in Chicago. This was a six part series including informal discussions, exercises, mock facilitation, and simulated debates.

RESIST's recent grant went to the UPWA's Leadership Development Program for women community organizers. The program aims to deepen women's understanding of the interconnectedness of gender, race, class, and national oppression while working to become effective advocates for social justice; to sharpen skills of Arab American women as organizers; to develop creative and culturally sensitive approaches to challenging existing attitudes towards women in Arab communities; and to increase the leadership participation of women in existing Arab American organizations.

National Network of Abortion Funds,

c/o Abortion Rights Fund of Western Mass., P.O. Box 732, Hadley, MA 01035.

By the end of the Reagan-Bush years, an estimated one in five American women seeking an abortion were unable to obtain one, and many of those who did had to overcome enormous obstacles because of class and age barriers. Medicaid cutoffs in most states, the closing of clinics in teaching hospitals, parental consent laws, attacks on

sex education programs, and growing numbers of uninsured "working poor," all contributed to the problem. Women of color, rural women, and women with chronic health problems or disabilities have been disproportionately denied access to abortion and other reproductive health care.

During the 1980s, many women became involved in local fundraising and advocacy efforts to help women through the development of abortion funds. By 1992, more than 25 abortion funds around the U.S. existed, but most operated locally and had little contact with each other. Despite the perception that Bill Clinton has reversed the restrictions of the Reagan-Bush era, virtually nothing has changed for young and poor women. The continued erosion of abortion access, especially at a time when national policy could restructure health care access in general, makes this a key moment to bring together representatives of existing funds to create a National Network of Abortion Funds.

The Network will enable abortion funds to collectively: create a significant political voice for public funding to assure women equal access to safe, legal abortion; provide a forum for discussing local, state-wide and national strategies for restoration of public funding for abortion; provide mutual support; share information and resources through a quarterly newsletter; support the development of new funds in unserved areas; establish a national abortion referral service; give funds more clout in negotiating with providers for favorable fees and improved quality of service.

To this end, the Greater Philadelphia Women's Medical Fund and the Abortion Rights Fund of Western Massachusetts are organizing a conference to bring together

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Join the Resist Pledge Program

We'd like you to consider becoming a Resist Pledge. Pledges account for over 25% of our income. By becoming a pledge, you help guarantee Resist a fixed and dependable source of income on which we can build our grant making program. In return, we will send you a monthly pledge letter and reminder, along with your newsletter. We will keep you up-to-date on the groups we have funded, and the other work being done at Resist. So take the plunge and become a Resist Pledge! We count on you, and the groups we fund count on us.

☐ **Yes! I would like to become a Resist Pledge. I'd like to pledge \$_____**

_____ (monthly, bi-monthly, quarterly, 2x a year, yearly).

☐ **Enclosed is my pledge contribution of \$_____.**

☐ **I can't join the pledge program just now, but here's a contribution to support your work. \$_____**

Name _____

Address _____

City/State/Zip _____

Resist

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